REST AVAILABLE COPY

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

		_				_			•
Ε	ffe	ct	ive	Oct	obe	r 1	, 200	00	

Effective October 1, 2000 9/1692455											
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY											
TOTAL CLAIMS							RAT	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE 355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			29 minus 20=		· 9		X\$ 9	=	OR	X\$18=	162
INDEPENDENT CLAIMS			1) minus 3 =		•	8		X40=		7400	640
MULTIPLE DEPENDENT CLAIM PRESENT						+135	_	OR		W 10	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA		OR OR	L	1073	
	CLAIMS AS AMENDED - PART II							<u> </u>	۳۰۳		1572,
(Column 1)			(Column 2) (Column 3)			SMAI	L ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE
Š	Total	.30	Minus	. 2	9	= (X\$ 9	=	OR	X\$18=	18/
AME	Independent	• ((Minus		(=	X40=		OR	X80=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
L	FINST PHESE	NTATION OF M	ULTIPLE	DEPENDENT	CLAIM		+135:	7	1	+270=	
							TOT		OR	TOTAL	
		(Column 1)		(Colum	nn 21	(Column 3)	ADDIT. F	EE	JOR	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	••		=	X\$ 9=		OR	X\$18=	
AM	Independent	NTATION OF MU	Minus		CLAISE	=	X40=		OR	X80=	
<u> </u>			YETT CE	DEFENDENT	CCANIVI		+135=		OR	+270=	
							TOTA		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colum		(Column 3)			•		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S	Total	•	Minus	••		=	X\$ 9=	1	OR	X\$18=	
AM	Independent	· NTATION OF MU	Minus	···	CLAISA	=	X40=		OR	X80=	
_	·······································	ATATION OF MI	·	OEF ENDEN I	CLAIM		+135=	1	OB	+270=	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

ADDIT. FEE